

		Kahn		W/R.	
26/ 8/1948	...	+2	...	++	
6/ 1/1949	...	+1	...	++	
21/ 3/1949	...	+2	...	++	
1/ 6/1949	...	+1	...	++	Splenectomy
7/ 7/1949	...	—	...	—	
3/ 8/1950	...	—	...	—	
5/10/1950	...	—	...	—	

It is possible that the positive results found with the serological tests for syphilis may have been false, and associated with the hæmolytic anæmia found in the hypersplenic syndrome. Information on this point, in the literature, is lacking, but false positive Wassermann results have been reported in hæmolytic anæmia by Rubenstein (1948). In this department, of eighteen cases of hæmolytic anæmia, where syphilis was excluded, false positive W/R results were found in three, doubtful results in two, and negative in the remainder. Our own findings have tended to suggest that these false serological results are associated mainly with periods of crisis which did not occur in this case. However, the coincidental reversal of the positive serology to negative associated with the removal of evidence of active hæmolysis following splenectomy suggests a possible relationship between these findings.

SUMMARY

A case of hypersplenic anæmia with panhæmatocytopenia, splenomegaly and hyperplastic marrow, showing an excellent response to splenectomy is described.

REFERENCES.

- RUBENSTEIN, M. A. : *J. Lab. clin. Med.*, 33, 753; 1948.
DAMESHEK, W. : "The spleen and hypersplenism," New York, 1947.
DOAN, C. A., AND WRIGHT, C. S. : *Blood*, 1, 10; 1946.
HAAM, E. VON., AND AWNY, A. J. : *Amer. J. clin Path.*, 18, 313; 1948.
WISEMAN, B. K., AND DOAN, C. A. : *Ann. int. Med.*, 16, 1097; 1942.

REVIEW

BRONCHIOGENIC CARCINOMA AND ADENOMA. With a Chapter on Mediastinal Tumours. By B. M. Fried, M.D.

AN extremely well produced book, with only a few typographical errors. The reproductions of X-ray film and microphotographs are particularly good; an extensive bibliography is given at the end of each section. Every aspect of carcinoma is meticulously discussed, the chapters on pathology, metastases, and the combination of carcinoma and tuberculosis being very good.

Bronchiogenic adenoma is very well done. The comparison to an iceberg, as regards the endo-bronchial and extra-bronchial portions, is very apt, with reference to endo-bronchial methods of dealing with the tumour.

Doctor Fried is a physician, and so does not discuss details of surgical treatment. He gives the accepted contraindications. Regarding treatment by radiation, there is some evidence nowadays that the results may be somewhat better than he has indicated.

A book to be recommended.

G. R. B. P.